# IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MAINE

Brice Nell CANTRELL EXECUT	28,
(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional	
page with the full list of names.) -against-	
Brunswick maine Police/ Town of mousswick me.	<u>-</u>
(Write the full name of each defendant who is being sued. If the names of all the defendants	_
cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)	

Complaint for a Civil Case

Civil No. 2:24 ev 246 NT (to be filled in by the Clerk's Office)

Jury Trial: ☐ Yes ☐ No (check one)

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Page 2 of 10 PageID #: 2

# I. The Parties to This Complaint

#### A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Brice Nell Cantrel Exe.

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address

Brice Nell Cantrel Exe.

Comber and County

Drunswick Cumber and

Comber and

Drice Cantrell 9656 amal Comber and

Drice Nell Cantrell Exe.

## B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1	
Name	NATHAN DAS
Job or Title	Officer
(if known) Street Address	
City and County	Brunswick cumber AND
State and Zip Code	maine - 04011
Telephone Number	207 725 3521
E-mail Address	N DAY
(if known)	
Defendant No. 2	10
Name	Paige Michaud
Job or Title	officer
(if known)	
Street Address	
City and County	Brunswick Police 04011

State and Zip Code Telephone Number E-mail Address (if known)	Brunswict maine 04011  PMICHAUL @ Brunswick Pd. Org
Defendant No. 3  Name Job or Title (if known) Street Address City and County State and Zip Code Telephone Number E-mail Address (if known)	PAUL HANSEN  COMMANDER / INVESTIGATING OFFICER  OF COMPTAINTS  Brunswick cumberland  MAINE 04011  207 825 5521  PHANSEN BBrunswick Pd. Org
Defendant No. 4  Name Job or Title (if known) Street Address City and County State and Zip Code	Scott Stewart Cheif of Police Brunswick combedand Maine 04011
Telephone Number E-mail Address (if known)	207 725 5521 SSTEWART & Brunswick Pd. Org

#### II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What	is the b	asis for federal court jurisdiction? (check all that apply)
	Fed	eral question   Diversity of citizenship
Fill ou	it the pa	aragraphs in this section that apply to this case.
A.	If the	Basis for Jurisdiction Is a Federal Question
		crime Committed, Section 42, 1220
В.	If the	Basis for Jurisdiction Is Diversity of Citizenship
	1.	The Plaintiff(s)
		a. If the plaintiff is an individual  The plaintiff, (name) Bolce Chartel, is a citizen of the State of (name) Maine.
		(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)
	2.	The Defendant(s)
	90	a. If the defendant is an individual  The defendant, (name) NAME, is a citizen of the State of (name) MANC.  Or is a citizen of (foreign nation) YES HE 15.

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	b. If the defendant is a corporation
	The defendant, (name) Brunswich Po, is
	incorporated under the laws of the State of (name)  (MAINC , and has its principal place of
	business in the State of (name) MAIN . Or is
	incorporated under the laws of <i>(foreign nation)</i> , and has its principal place of
	business in (name) BOUNSWICK
	(If more than one defendant is named in the complaint, attach an
	additional page providing the same information for each additional defendant.)
	The Amount in Controversy 10 COUNTS OF Deposition The Amount in controversy—the amount the plaintiff claims the defendant
3.	The Amount in Controversy / WILLIAM IN DAMAGES
	The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest
	and costs of court, because (explain):
	ON foot derivation of freedom, false parest took my recording device, retaintion, assault,
	a de la
	Prior Restraint, Failure to Identify
Statement of	f Claim
Write a short	and plain statement of the claim. Do not make legal arguments. State as
briefly as pos	ssible the facts showing that each plaintiff is entitled to the damages or other.  State how each defendant was involved and what each defendant did that
caused the pl	aintiff harm or violated the plaintiff's rights, including the dates and places
of that involv	vement or conduct. If more than one claim is asserted, number each claim hort and plain statement of each claim in a separate paragraph. Attach
additional pa	ges if needed.
JUNE Z	382,2023 ASSAULT, DY NOTHING CO.
Datend	ing my Rights verbly, Cutts Delling
March 1	Buth sholders Are Reprised, PAIN AGTERTH'S
DOCNIT!	Became UNBAFEABLE, JAN OF 2024,
1422120.2)	1 thoram for 3 mounts, 10 16 Left Arm,
PUNBOLI	2018 Limit Right Arm, BIW, put me IN tool
Limit )	hort and plain statement of each claim in a separate paragraph. Attach ges if needed.  3RL, 2023 ASSAULT, BY WATHAN CAY, FOR  ING MY RIGHTS VEIBLY, CUTTS BEHIND  BOTH Sholders Are Repaired, PAIN After this  BECAME UNBARRABLE, TAN OF 2024,  A Therapy for 3 mounths, 10 BLEFT Arm  30 LB Limit Right Arm, BIW, put me IN tool  BECAUSE OF MY Limits.
11/6/11/11	Dealla

III.

#### IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

crosed shoulder pain in pighis and theripy form ruscule

### V. Closing

I agree to provide the Clerk's Office with any changes to my address where caserelated papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

free allew

Date of signing: TINE 27 2024

Signature of Plaintiff

Printed Name of Plaintiff

Man Mureul

C.	What date and approximate time did the events giving rise to your claim(s) occur?
	TUDE 23-2623, NATHAN DAY ASSAULT BATTERY, for
	Deserving my 4th Americanent Right to travel.
	Tune 23-2623, NATHAN DAY ASSAULT BATTERY for Defending my 4th Amendment Right to travel,  The 3-2024, NATION DAY Retailation \$152, ticket 8 min  After Recording film.  What are the facts underlying your claim(c)? (For example: What happened to you? Who did what?
	After Recording time
D.	What are the facts underlying your claim(s)? (For example: What happened to you? Who did what?
	Was anyone else involved? Who else saw what happened?)
	What are the facts underlying your claim(s)? (For example: What happened to you? Who did what?  Was anyone else involved? Who else saw what happened?)  Chiler of Buisness I Provided At, June 23-2023  Video evidence
	Video evidence
	Video evidence
	June
	and Collins
	(b)

#### V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did not receive.

HANDICAPPED BOTH Showlders Left Showlder, damages a moonth's of Philisical Therapy. Torn Rotato Cost, Prince every dry Since shalse notest June 23 202; By NATHAN dry, Damages my Recording Derice, Batter Distroyed 1100, therapy \$1000.

#### VI. Relief

If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims. NATHAN DAY, trckets me Brick cantrell for pedestrain on Highway, never Stepped on Road way. Dismissed Dec, of 2023, Headlight ticket threated with violent arrest 3 times by Paige M. Contract signed under duress Judge Dose Not dismiss After Paige M. Agreed, She threated to Arrest for No Crime No victim

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes.

A.	Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?
	Yes
	Ŋ No
В.	If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1. Parties to the previous lawsuit  Plaintiff(s) Brice CANTrell  Defendant(s) Brunswick MAINE Police / town
	2. Court (if federal court, name the district; if state court, name the county and State)  Federal District of MAINE
	3. Docket or index number  (1/1) NO. 7:23-CV-00283-NT
	4. Name of Judge assigned to your case  **Expression of the content of the conten
	5. Approximate date of filing lawsuit Tuly 2023
	6. Is the case still pending?
	X Yes
	□No
	If no, give the approximate date of disposition.
	7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
	Part dismissed Part granted.
C.	Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?  Page 9 of
	Page 9 of

# U.S. DISTRICT COURT DISTRICT OF MAINTEE UNITED STATES DISTRICT COURT For the 2024 July 10: 02

Division
UEPUTY CLERK

Brice controll exe.

Case No.

2:24. LV · 246 · NT (to be filled in by the Clerk's Office)

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Brunswick Police et al

Officers NAThanday, Paige Mehardi

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

#### COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

#### NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

Borathor ese July 10 2024

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AO 240 (Rev. 07/10) Application to Proceed in District Court Without Prepaying Fees or Costs (Short Form)

4. Amount of money that I have in cash or in a checking or savings account: \$_\( \int O \text{OO} \dot \delta \text{OO} \dot \delta \text{OO} \dot \delta \text{OO} \delta \delta \delta \delta \text{OO} \delta
5. Any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value that I own, including any item of value held in someone else's name (describe the property and its approximate value): TWO CAT PAYMENTS. 1000. MONTHY.
6. Any housing, transportation, utilities, or loan payments, or other regular monthly expenses (describe and provide the amount of the monthly expenself /000. A YEAV TO INVESTIGATE BOUNSWICK FOICE \$1000. A YEAVIN EQUIPMENT CAMERAS MEMORY CAPOS TRYPODS - ECT -\$8000. IN 4 YEAVS.
7. Names (or, if under 18, initials only) of all persons who are dependent on me for support, my relationship with each person, and how much I contribute to their support: Melissa CANFREN wife Lependary WABLE to work, Limmited Mobility,
8. Any debts or financial obligations (describe the amounts owed and to whom they are payable): 2016- Jeep \$500. Monthly Capital ONE. 2016 CAMERO, Wifes CAT, \$500.1
Declaration: I declare under penalty of perjury that the above information is true and understand that a false statement may result in a dismissal of my claims.
Date: MAY 11-2024  Applicant's signature

Brice Neil